

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

(n 700z

OMB APPROVAL OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response. . . . . 16.00

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						
1	1					

UNIFORM LIMITED OFFERING EXEMPTION	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Units of Limited Partnership Interests	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	:
Type of Filing: New Filing  Amendment	
A. BASIC IDENTIFICATION DATA	1 100 (11 10 10 10 10 10 10 10 10 10 10 10 10 1
1. Enter the information requested about the issuer	07067507
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Calamos Global Opportunities Fund LP (f/k/a Calamos Growth and Income Fund LP)	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telepho	ne Number (Including Area Code)
2020 Calamos Court, Naperville, Illinois 60563 (630)245-	7200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telepholist (if different from Executive Offices)	one Number (Including Area Code)
Same as executive offices	
Brief Description of Business	
Investing in securities and other instruments, foreign and domestic	·
Type of Business Organization	PROCESSED
corporation   I limited partnership, already formed   other (please specific	
business trust limited partnership, to be formed	JUN 1 9 2007
Month Year  Actual or Estimated Date of Incorporation or Organization: 111 06 Actual Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)	HUWSON FINANCIAL
GENERAL INSTRUCTIONS	
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4( 77d(6).	6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is	

which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or • Managing Partner
* General Partner
Full Name (Last name first, if individual)
Calamos Advisors LLC (the "General Partner")
Business or Residence Address (Number and Street, City, State, Zip Code) 2020 Calamos Court, Naperville, IL 60563
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual)  Calamos, John P., Sr.
Business or Residence Address (Number and Street, City, State, Zip Code)
2020 Calamos Court, Naperville, IL 60563
Check Box(es) that Apply: Promoter Beneficial Owner  Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual) Calamos, Nick P.
Business or Residence Address (Number and Street, City, State, Zip Code)
2020 Calamos Court, Naperville, IL 60563
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual)
Calamos, John P., Jr.
Business or Residence Address (Number and Street, City, State, Zip Code)
2020 Calamos Court, Naperville, IL 60563
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual)  Dudasik, Patrick H.
Business or Residence Address (Number and Street, City, State, Zip Code) 2020 Calamos Court, Naperville, IL 60563
Check Box(es) that Apply: Promoter Beneficial Owner  Executive Officer •• Director General and/or Managing Partner
Full Name (Last name first, if individual) Hamman, James S., Jr.
Business or Residence Address (Number and Street, City, State, Zip Code) 2020 Calamos Court, Naperville, IL 60563
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual)  Jones, Scott C.
Business or Residence Address (Number and Street, City, State, Zip Code) 2020 Calamos Court, Naperville, IL 60563
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				A. BASIC IDE	NTII	FICATION DATA				
2. Enter	the information re	quested for the fol	llowing							- " -
• E	ach promoter of t	he issuer, if the is	sucr has	been organized wi	ithin 1	he past five years;				
• E	ach beneficial ow	ner having the pow	er to vo	te or dispose, or dir	ect th	e vote or disposition o	f, 10	% or more o	of a clas	s of equity securities of the issuer.
• E	ach executive off	icer and director o	f corpo	rate issuers and of o	corpo	rate general and man	aging	partners of	f partne	ership issuers; and
• E	each general and r	nanaging partner o	f partne	ership issuers.						
Check Box	(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer **		Director		General and/or Managing Partner
Eull Mama /	(Last name first, i	É indicidon IV				<del> </del>				
	(Last name 117st, 1 Philip E., II	r individual)								
		ss (Number and	Ctrant	City, State, Zip Co	dal	···				
		perville, IL 6056		City, State, Zip Co	ue)					
Check Box(	(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer **		Director		General and/or Managing Partner
Full Name ( Baka, Jan	(Last name first, i nes F.	f individual)					·			
Business or	Residence Addre	ss (Number and	Street,	City, State, Zip Co	de)			,	•	,
2020 Calai	mos Court, Nar	erville, IL 6056	3							
Check Box(	(es) that Apply:	Promoter	I	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (	(Last name first, i	f individual)								
Business or	Residence Addre	ss (Number and	Street,	City, State, Zip Co	đe)					
Check Box(	(es) that Apply:	Promoter	E	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (	(Last name first, i	f individual)								
Business or	Residence Addre	ss (Number and	Street,	City, State, Zip Co	dc)					
Check Box(	(es) that Apply:	Promoter	F	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (	Last name first, i	f individual)								
Business or	Residence Addre	ss (Number and	Street,	City, State, Zip Co	de)					
Check Box(	es) that Apply:	Promoter	E	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (	Last name first, i	f individual)								<del></del>
Business or	Residence Addre	ss (Number and	Street,	City, State, Zip Coo	de)					
Check Box(	es) that Apply:	Promoter	E	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (	Last name first, i	f individual)	<u> </u>							
Business or	Residence Addre	ss (Number and	Street,	City, State, Zip Coo	de)					<u> </u>
		(Hea bloo	nlı obası	t or conv and use a	.ddiei	anal conies of this sh				

<sup>\*\*</sup> of the General Partner

B. INFORMATION ABOUT OFFERING													
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						Yes	No <b>⊠</b>					
	Answer also in Appendix, Column 2, if filing under ULOE.												
2.									\$	00,000.00			
3.	Does th	e offering	permit join	t ownershi	n of a sino	le unit?						Yes <b> ■</b>	No
4.		_											Leed
	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 7	(ip Code)		· · · · · · · · · · · · · · · · · · ·				
Nai	me of As	sociated Br	oker or De	aler									
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			_			
	(Check	"All States	s" or check	individual	States)	•						☐ AI	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM UE	NY	NC]	ND WA	OH WV	OK WI	OR WŸ	PA
	RI	SC	SD	TN	[TX]	UT	VT]	VA	WA	WV	WI	WI	PR
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nai	me of Ass	sociated Bi	oker or De	aler									
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						<u> </u>
	(Check	"All States	s" or check	individual	States)	•••••		***************************************				All States	
	AL	ÄK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH	NJ TX	NM UT	NY VT	NC VA	ND WA	(OH)	OK WI	OR WY	PA PR
Ful			first, if indi	[TN]	<u> </u>		VT	VA	[WA]		<u></u>	WI	
ı uı	i ivaille (i	Last Hallic	1115t, 11 11lui	-									
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)									l States				
	AL AK AZ AR CA CO CT DE DC FL GA HI I								lD				
	IL IN IA KS KY LA ME MD MA MI MN								MS	MO			
	MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI										OR WY	PA PR	

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	0.00	<b>\$</b> 0.00
	Equity		\$ 0.00
	Common Preferred	<b>,</b>	Ψ
	Convertible Securities (including warrants)	0.00	0.00 \$
	Partnership Interests		
	Other (Specify)		\$ 0.00
	Total	100,000,000.00	·
	Answer also in Appendix, Column 3, if filing under ULOE.	P	3
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	1	\$ 52,159,655.1
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of	Dollar Amount Sold
	Rule 505	Security	
	Regulation A	-	\$
	•	1	\$
	Rule 504	-	\$ \$ 0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$_ <sup>0.00</sup>
	Printing and Engraving Costs		\$_0.00
	Legal Fees	<b>Z</b>	\$_30,000.00
	Accounting Fees		\$ 75,000.00
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify)		\$ 0.00
	Total	_	s 105,000.00

Щ.				
	and total expenses furnished in response to Part C	fering price given in response to Part C — Question — Question 4.a. This difference is the "adjusted gros	SS	\$
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The tota proceeds to the issuer set forth in response to P	d		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		. 🗀 \$	
	Purchase of real estate		. 🗀 \$	s
	Purchase, rental or leasing and installation of n	nachinery	. 🗆 <b>\$</b>	
	Construction or leasing of plant buildings and	facilities	. 🗆 <b>\$</b>	\$
	Acquisition of other businesses (including the offering that may be used in exchange for the a issuer pursuant to a merger)	. □\$	□\$	
			_	_
			_	- —
			. 🗆 \$	_ []\$
	Column Totals		\$ <u></u>	<u>\$ 99,895,000.00</u>
	Total Payments Listed (column totals added)	99,895,000.00		
		D. FEDERAL SIGNATURE		
sig	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this noti- furnish to the U.S. Securities and Exchange Comm accredited investor pursuant to paragraph (b)(2) of	ission, upon writte	
Ca	ucr (Print or Type) alamos Global Opportunities Fund LP (f/k/a alamos Growth and Income Fund LP)	Signature	Date 6-6	-07
	me of Signer (Print or Type) athy Darcy	Title of Signer Print or Type Vice President and Associate Counsel Calamos Advisors L.C. General partner		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

\*\*\* There is no management fee paid to the General Partner of the Fund, however, the Limited Partners will enter into an investment advisory agreement directly with the General Partner, as investment advisor, and will pay advisory fees as provided therein. The Issuer pays its own operating expenses, including legal accounting, and audit expenses, and the costs of the continuous offering of Units. For a one-year period the General Partner will pay all the for Fund's ordinary administrative expenses. Thereafter, General Partner will cap the Fund's ordinary administrative expenses at an annual rate of 0.08% of the Fund's average month-end net asset value. Any administrative expenses in excess of this cap will be reimbursed by the General Partner. The General Partner will determine annually whether to continue this cap. The Issuer also pays its own investment expenses, including brokerage commissions and other expenses incurred in connection with trading in securities. Such expenses and fees cannot be quantified at present.

- ATTENTION -